SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use seperate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)					
21b	22	X 23	24	25	26
27	28a	28b	28c	29	30b

PAGE 17 / 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HOGAN & HARTSON POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
JIM RAMSTAD VOLUNTEER COMMITTEE

Mailing Address 1809 Plymouth Road South #310
1809 Plymouth Road South #310

City	State	Zip Code
Minnetonka	MN	55305

Purpose of Disbursement

Candidate Name
JIM RAMSTAD

Category/Type

Office Sought: X House
Senate
President
State: MN District: 03

Disbursement For: 2007
X Primary General
Other (specify) ▼

Transaction ID: SB23.4291
Date of Disbursement
M M / D D / Y Y Y Y
0 2 / 2 0 / 2 0 0 7

Amount of Each Disbursement this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JO BONNER FOR CONGRESS COMMITTEE

Mailing Address P.O.Box 851232

City	State	Zip Code
Mobile	AL	36685

Purpose of Disbursement

Candidate Name
JO BONNER

Category/Type

Office Sought: X House
Senate
President
State: AL District: 01

Disbursement For: 2007
X Primary General
Other (specify) ▼

Transaction ID: SB23.4273
Date of Disbursement
M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 0 7

Amount of Each Disbursement this Period
1000.00

C. Full Name (Last, First, Middle Initial)
JOE WILSON FOR CONGRESS COMMITTEE

Mailing Address Post Office Box 2145

City	State	Zip Code
West Columbia	SC	29171

Purpose of Disbursement

Candidate Name
ADDISON (JOE) GRAVES WILSON

Category/Type

Office Sought: X House
Senate
President
State: SC District: 02

Disbursement For: 2006
X Primary General
Other (specify) ▼

Transaction ID: SB23.4288
Date of Disbursement
M M / D D / Y Y Y Y
0 2 / 0 6 / 2 0 0 7

Amount of Each Disbursement this Period
1000.00

SUBTOTAL of Disbursements This Page (optional) .... ▶ 3000.00

TOTAL This Period (last page this line number only) .... ▶

FEC **Schedule B (Form 3X)** Rev. 02/2003